

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

DR BRIAN BABIN FOR CONGRESS

ADDRESS (number and street)

PO BOX 159

Check if different  
than previously  
reported. (ACC)

WOODVILLE

TX

75979

2. FEC IDENTIFICATION NUMBER ▼

C

C00553859

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

TX

36

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
03 / 04 / 2014in the  
State of

TX

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2014

through

M M / D D / Y Y Y Y  
02 / 12 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sue Cleveland

Signature of Treasurer

Sue Cleveland

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
02 / 16 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 56

Write or Type Committee Name

DR BRIAN BABIN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	107849.71	133505.71
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	107849.71	133505.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	86166.87	89557.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	86166.87	89557.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	118948.38	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	116210.57	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 56

Write or Type Committee Name

**DR BRIAN BABIN FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

84519.49

106469.49

**(ii) Unitemized.....**

9830.22

10411.22

**(iii) TOTAL of contributions from individuals ▶**

94349.71

116880.71

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

13500.00

13500.00

**(d) The Candidate.....**

0.00

3125.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

107849.71

133505.71

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

25000.00

75000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

25000.00

75000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

132849.71

208505.71

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 56

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	86166.87	89557.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	86166.87	89557.33

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	72265.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	132849.71
25. SUBTOTAL (add Line 23 and Line 24).....	205115.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	86166.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	118948.38

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Lonnie Arrington

Mailing Address 1348 Moore Rd

City

Beaumont

State

TX

Zip Code

77713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fabricon

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Edward J. Artnak

Mailing Address 120 E. Beauregard Ave

City

San Angelo

State

TX

Zip Code

76903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.4315

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Douglas C Babin

Mailing Address 4365 Thomas Glen

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Entergy

Occupation

Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4372

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr Phil Bailey

Mailing Address 4100 Bowen Rd

City

Arlington

State

TX

Zip Code

76016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pediatric Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Tim C Bauer

Mailing Address 1800 Bauer Rd

City

Winnie

State

TX

Zip Code

77665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Rancher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		01		2014

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Patrick J Brett

Mailing Address 300 Mercer St

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Citi

Occupation

Financial Services

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Terry R. Brown

A.

Mailing Address 26002 Budde Rd

City

The Woodlands

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.4307

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Gerald Ray Callas

B.

Mailing Address 4240 Brownstone

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4550

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Gary Carby

C.

Mailing Address 17840 Castle Bend Dr

City

Dallas

State

TX

Zip Code

75287

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UBS

Occupation

Senior Vice President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		15		2014

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DR BRIAN BABIN FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Charles W. Carter</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 23 / 2014	
Mailing Address P.O. Box 920679		<b>Transaction ID : SA11AI.4313</b>	
City Houston	State TX	Zip Code 77292	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Nicholas N Carter</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 7760 Rosewood		<b>Transaction ID : SA11AI.4358</b>	
City Lumberton	State TX	Zip Code 77657	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Southhampton	Occupation Photographer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Dr. J. D. Chandler</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2014	
Mailing Address 1206 10th St		<b>Transaction ID : SA11AI.4270</b>	
City Huntsville	State TX	Zip Code 77320	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Self	Occupation Dentist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		_____ 2000.00	
<b>TOTAL</b> This Period (last page this line number only).....		_____	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jerry Clark

Mailing Address 1338 FM 253

City

Buna

State

TX

Zip Code

77612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sabine River AuthorityOccupation  
General Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		31		2014

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Grant Dewey

Mailing Address 1 Prescott Lane

City

Greenwich

State

CT

Zip Code

68310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CitiOccupation  
Finance

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.4441

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Walter Diggles

Mailing Address P.O. Box 1404

City

Jasper

State

TX

Zip Code

75951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Deep East Texas Council of GovOccupation  
Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		16		2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

George A Dishman Jr

Mailing Address 6820 College Street

City

Beaumont

State

TX

Zip Code

77707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

David Drinkard

Mailing Address 13520 Niagara St

City

Beaumont

State

TX

Zip Code

77713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Artist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Marsha Elmore

Mailing Address 1005 FM 1340

City

Hunt

State

TX

Zip Code

78024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Camp Waldemar

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4481

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jack Esler

Mailing Address P.O. Box 907

City

Thompson Falls

State

MT

Zip Code

59873

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		05		2014

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Harold Estes

Mailing Address 505 Hickory Hollow

City

Lufkin

State

TX

Zip Code

75904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Texas Timberjack, Inc

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		03		2014

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Shelley Evans

Mailing Address 1922 FM 256 W

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew Farley**

Mailing Address 6122 Longmont Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KBR Inc

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2014

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Heyward Fetner**

Mailing Address P.O. Box 713

City

Colmesneil

State

TX

Zip Code

75938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4370

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Steven Finkleman**

Mailing Address 5303 Braesheather Drive

City

Houston

State

TX

Zip Code

77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scope Imports Inc

Occupation

CFO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Valerie Freeman

A.

Mailing Address 305 Lands End St

City

Ft. Worth

State

TX

Zip Code

76109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RDF, Inc

Occupation

Self-Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2014

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Curtis Garner

B.

Mailing Address P.O. Box 717

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		09		2014

Transaction ID : SA11AI.4457

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Joseph John Geraci

C.

Mailing Address 29 Indian Hill Rd

City

Stamford

State

CT

Zip Code

06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Citi

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		08		2014

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Susan Geraci

A.

Mailing Address 29 Indian Hill Rd

City

Stamford

State

CT

Zip Code

06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Edmund Lee Haag III

B.

Mailing Address 39 Firefall Ct

City

The Woodlands

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Robert Scott Hall

C.

Mailing Address 5550 Frost

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LNVA

Occupation

General Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4548

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Thomas C. Harrison

Mailing Address 726 Cascet Court

City

Katy

State

TX

Zip Code

77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Edd C. Hendee

Mailing Address 10505 Katy Fwy

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Taste of Texas

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

George Henderson

Mailing Address P.O. Box 3659

City

Lufkin

State

TX

Zip Code

75903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Angelina Hardwood

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		03		2014

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

John Henderson

A.

Mailing Address 9 Oak Trace

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4544

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Judy Hillegeist

B.

Mailing Address 564 River Cliff Dr

City

Canyon Lake

State

TX

Zip Code

78133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		28		2014

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dean Hutto

C.

Mailing Address 412 S. Burnett Dr

City

Baytown

State

TX

Zip Code

77520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.4437

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Scott Jones

Mailing Address 5425 Byers Avenue

City

Fort Worth

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Regions BankOccupation  
Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. A. B. Jordan

Mailing Address 105 Sand Hills

City

Lufkin

State

TX

Zip Code

75901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2014

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Christopher C Juban

Mailing Address 3718 Westerman Street

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Evercore PartnersOccupation  
Investment Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.4350

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Paula I Kopcynski

A.

Mailing Address 16103 Meyrick Court

City

Spring

State

TX

Zip Code

77379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.4346

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Stephen Lee

B.

Mailing Address 30 Knotty Pine Ln

City

Orange

State

TX

Zip Code

77630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First Financial Bank

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

William C. Leigh

C.

Mailing Address 2713 S. Wildwind Cir

City

The Woodlands

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Leigh Custom Homes, Inc

Occupation

Homebuilder

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2014

Transaction ID : SA11AI.4284

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

1750.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 56  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**DR BRIAN BABIN FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ron Lewis</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 07 / 2014	
Mailing Address 919 Congress Ave Suite 1030		<b>Transaction ID : SA11AI.4215</b>	
City Austin	State TX	Zip Code 78701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Kim Marling</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 30 S. Tranquil Path		<b>Transaction ID : SA11AI.4526</b>	
City The Woodlands	State TX	Zip Code 77380	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Housewife	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Robert E. Marling</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 30 S. Tranquil Path		<b>Transaction ID : SA11AI.4303</b>	
City The Woodlands	State TX	Zip Code 77380	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Woodforest Bank	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		5700.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Laverne N Mathews

A.

Mailing Address 24 Waterford Gardens

City

Orange

State

TX

Zip Code

77630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

James F. McIngvale

B.

Mailing Address 1200 Wilcrest Dr

City

Houston

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gallery Furniture

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2014

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Linda McIngvale

C.

Mailing Address 1200 Wilcrest Dr

City

Houston

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gallery Furniture

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2014

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DR BRIAN BABIN FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Lamont E Meaux</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address P.O. Box 16			<b>Transaction ID : SA11AI.4497</b>	
City	State	Zip Code		
Stowell	TX	77661		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed		Occupation Businessman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Travis T. Miller</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014	
Mailing Address 3314 Concord			<b>Transaction ID : SA11AI.4319</b>	
City	State	Zip Code		
Orange	TX	77630		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed		Occupation Dentist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Joseph R Moderow</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2014	
Mailing Address 34342 Amber Lantern St			<b>Transaction ID : SA11AI.4455</b>	
City	State	Zip Code		
Dana Point	CA	92629		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Retired		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1250.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mark M. Moore

Mailing Address P.O. Box 671

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cypress Creek Cattle, Inc

Occupation

Rancher

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		15		2014

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

William Snowden Nichols

Mailing Address 10923 Kirwick

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Suncor Companies

Occupation

Real Estate Developer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Gregory R Ogletree

Mailing Address P.O. Box 1196

City

Livingston

State

TX

Zip Code

77351

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investments

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		08		2014

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

3250.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Barbara Olson

A.

Mailing Address 180 Tiger Lily

City

Bridge City

State

TX

Zip Code

77084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dr. David Olson

Occupation

Office Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4552

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

David Olson

B.

Mailing Address 180 Tiger Lily

City

Bridge City

State

TX

Zip Code

77611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Katherine Olson

C.

Mailing Address 16622 Glamis Ln

City

Houston

State

TX

Zip Code

77084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		26		2014

Transaction ID : SA11AI.4532

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Hubert Oxford III****A.**
 Mailing Address 3535 Calder Ave  
 Suite 300

City	State	Zip Code
Beaumont	TX	77706

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Self-Employed

 Occupation  
 Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

**Transaction ID : SA11AI.4325**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Dr. David Terry Palmer****B.**

Mailing Address 111 Christie Ln

City	State	Zip Code
Lufkin	TX	75901

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Self

 Occupation  
 Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

**Transaction ID : SA11AI.4186**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**J Richard Pegues****C.**

Mailing Address 2604 COS

City	State	Zip Code
Liberty	TX	77575

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Liberty ISD

 Occupation  
 Teacher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		05		2014

**Transaction ID : SA11AI.4501**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3850.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kenneth A Pelt

Mailing Address 12487 Pelt Rd

City

Kountze

State

TX

Zip Code

77625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hardin County

Occupation

Commissioner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4354

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Patrick H Phelan

Mailing Address P.O. Box 1390

City

Beaumont

State

TX

Zip Code

77704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investments

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Alan A. Phelps

Mailing Address 2040 N. Loop 336 West  
Ste 302

City

Conroe

State

TX

Zip Code

77304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2014

Transaction ID : SA11AI.4299

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Larry A. Pullen

Mailing Address 14823 Alderwick Dr

City

Sugar Land

State

TX

Zip Code

77598

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Photographer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.4344

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Barbara Quinn

Mailing Address P.O. Box 5637

City

Beaumont

State

TX

Zip Code

77726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		14		2014

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Bob Quinn

Mailing Address P.O. Box 5637

City

Beaumont

State

TX

Zip Code

77726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		14		2014

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Emanuel J Rachel

A.

Mailing Address 1324 W Church St

City

Livingston

State

TX

Zip Code

77351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shrimp Boat Manny'sOccupation  
Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SA11AI.4487

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dr. Judith Ann Ragsdale

B.

Mailing Address 63 Redbud Ridge Place

City

The Woodlands

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SA11AI.4445

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

James Curtis Ray

C.

Mailing Address 6355 Westgate Drive

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Land Man

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		06		2014

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Jordan W. Reese

A.

Mailing Address P.O. Bxo 12724

City

Beaumont

State

TX

Zip Code

77726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investments

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4331

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

Travis Crews Riley

B.

Mailing Address P.O. Box 712

City

Colmesneil

State

TX

Zip Code

75938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Computer Software

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SA11AI.4427

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Dr. Edward F. Rod Jr.

C.

Mailing Address 430 Berry Rd

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Dentist

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

2100.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kenneth E. Ruddy

Mailing Address 1000 IH 10 North

City

Beaumont

State

TX

Zip Code

77702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Classic Chevrolet

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4329

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Christine Moor Sanders

Mailing Address P.O. Box 619

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tejas Sanders, LP

Occupation

Self-Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2014

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

William F. Scott

Mailing Address 5255 N. Twin City Highway

City

Nederland

State

TX

Zip Code

77627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period

1600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jean Sheridan

Mailing Address 4345 Sterling Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4546

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dorothy Sherman

Mailing Address 585 Belvedere

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4536

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. John C. Simkins

Mailing Address P.O. Box 2159

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2014

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kirsten Spurlock

Mailing Address 911 N Nellius

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

504.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.4378

Amount of Each Receipt this Period

504.54

In-kind - T-Shirts

Full Name (Last, First, Middle Initial)

Randol L Stout

Mailing Address 5606 Grey Charles Ct

City

San Angelo

State

TX

Zip Code

76904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		01		2014

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

William Stout

Mailing Address 2436 Nottingham Street

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sutliff &amp; Stout, PLLC

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1167.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		16		2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period

167.73

In-kind - Garmin GPS

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1672.27

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**William Stout****A.**

Mailing Address 2436 Nottingham Street

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sutliff & Stout, PLLCOccupation  
Attorney

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1314.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2014

**Transaction ID : SA11AI.4580**

Amount of Each Receipt this Period

147.22

In-kind - Cell Phone

Full Name (Last, First, Middle Initial)

**R. B. Taylor****B.**

Mailing Address 13326 Bay Place Dr

City

Beach City

State

TX

Zip Code

77523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Vivian Burris Todd****C.**

Mailing Address 1470 Thomas Road

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Re-MaxOccupation  
Realtor

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

**Transaction ID : SA11AI.4540**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

1397.22

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Juanita Turk

Mailing Address 1008 Pinewood Blvd

City

Sour Lake

State

TX

Zip Code

77659

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Re-Max

Occupation

Realtor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4534

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Dr. B. J. Westbrook

Mailing Address 838 Brookview St

City

Channelview

State

TX

Zip Code

77229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

C. Lindsey B. Whisenant

Mailing Address 130 S. Charlton

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Thomas Ford Williams

Mailing Address 14 South Dowlen Road

#120

City

Beaumont

State

TX

Zip Code

77707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		06		2014

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Merle C Zimmerman

Mailing Address 298 County Road 2152

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		03		2014

Transaction ID : SA11AI.4479

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

84519.49

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 56

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1111 14TH STREET, NW  
 SUITE 1100

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.

**C** C00000729

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2014

Transaction ID : SA11C.4297

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)  
**CITIZENS STATE BANK WOODVILLE TEXAS POLITICAL ACTION COMMITTEE**

Mailing Address 800 WASHINGTON AVE

City	State	Zip Code
WACO	TX	76701

FEC ID number of contributing  
federal political committee.

**C** C00094318

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11C.4400

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**KBR, INC. PAC**

Mailing Address 601 JEFFERSON  
 SUITE 3746C

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing  
federal political committee.

**C** C00431114

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2014

Transaction ID : SA11C.4340

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 56

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

PETE SESSIONS FOR CONGRESS

A.

Mailing Address PO BOX 823047

City

DALLAS

State

TX

Zip Code

75382

FEC ID number of contributing  
federal political committee.

C C00303305

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		15		2014

Transaction ID : SA11C.4244

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

B.

Mailing Address PO BOX 1488

1903 ATKINSON DRIVE

City

LUFKIN

State

TX

Zip Code

75902

FEC ID number of contributing  
federal political committee.

C C00297911

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		16		2014

Transaction ID : SA11C.4571

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

13500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 56

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRIAN BABIN (personal funds)

Mailing Address PO BOX 159

City

WOODVILLE

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C H6TX02079

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

78125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
0 2	/	1 1	/	2 0 1 4

Transaction ID : SA13A.4517

Amount of Each Receipt this Period

25000.00

Loan of personal funds from Dr. Brian Babin

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

25000.00

TOTAL This Period (last page this line number only).....

25000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Berry Communications LLC**

Mailing Address 7509 Spivey Dr

City	State	Zip Code
Austin	TX	78749

Purpose of Disbursement  
Mass Mailing

006

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

20300.00
----------

Transaction ID : SB17.4605

**B. Berry Communications LLC**

Mailing Address 7509 Spivey Dr

City	State	Zip Code
Austin	TX	78749

Purpose of Disbursement  
Mass Mailing

006

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

20300.00
----------

Transaction ID : SB17.4618

**c. Taylor Cooper**

Mailing Address P.O. Box 993

City	State	Zip Code
Woodville	TX	75979

Purpose of Disbursement  
Salary Advance

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

415.57
--------

Transaction ID : SB17.4603

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

41015.57

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Taylor Cooper**

Mailing Address P.O. Box 993

City	State	Zip Code
Woodville	TX	75979

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2014

Amount of Each Disbursement this Period

486.58
--------

Transaction ID : SB17.4614

**B. Taylor Cooper**

Mailing Address P.O. Box 993

City	State	Zip Code
Woodville	TX	75979

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

230.87
--------

Transaction ID : SB17.4615

**c. Cypher Technologies**

Mailing Address 205 W Gibson

City	State	Zip Code
Jasper	TX	75951

Purpose of Disbursement  
Computer Networking

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

Amount of Each Disbursement this Period

225.00
--------

Transaction ID : SB17.4596

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

486.58





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Harris Media, LLC**Mailing Address 611 S. Congress Avenue  
Suite 400

City Austin State TX Zip Code 78704

Purpose of Disbursement  
Website and Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

20675.00
----------

**Transaction ID : SB17.4591****B. Stephen Janushkowsky**

Mailing Address P.O. Box 159

City Woodville State TX Zip Code 75979

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

760.44
--------

**Transaction ID : SB17.4616****C. Autumn Jodzio**

Mailing Address 204 Fieldcrest

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement  
Computer Network Setup Costs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

1435.32
---------

**Transaction ID : SB17.4589****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

22870.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Autumn Jodzio**

Mailing Address 204 Fieldcrest

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

City	State	Zip Code
Ann Arbor	MI	48103

Amount of Each Disbursement this Period

375.50
--------

Purpose of Disbursement  
Airfare

002

**Transaction ID : SB17.4620**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Piryx, LLC**Mailing Address 144 2nd St  
FI 1

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

1500.82
---------

Purpose of Disbursement  
Fundraising Fees

003

**Transaction ID : SB17.4626**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Kirsten Spurlock**

Mailing Address 911 N Nellius

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
Woodville	TX	75979

Amount of Each Disbursement this Period

504.54
--------

Purpose of Disbursement  
In-kind - T-Shirts

006

**Transaction ID : SB17.4380**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

2380.86

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. William Stout**

Mailing Address 2436 Nottingham Street

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement  
In-kind - Cell Phone

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

Amount of Each Disbursement this Period

147.22
--------

Transaction ID : SB17.4581

**B. Emily Waldrep**

Mailing Address 2434 FM 2992

City	State	Zip Code
Woodville	TX	75979

Purpose of Disbursement  
Photography/Website Updates

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2014

Amount of Each Disbursement this Period

450.00
--------

Transaction ID : SB17.4599

**c. Emily Waldrep**

Mailing Address 2434 FM 2992

City	State	Zip Code
Woodville	TX	75979

Purpose of Disbursement  
Photography/Website Updates

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

Amount of Each Disbursement this Period

180.00
--------

Transaction ID : SB17.4601

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

777.22



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 45 OF 56

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4161

DR BRIAN BABIN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

BRIAN BABIN (personal funds)

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 159

City

State

ZIP Code

WOODVILLE

TX

75979

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

25000.00

0.00

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
12 17 / 2013M M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
None

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 46 OF 56

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4162

DR BRIAN BABIN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

BRIAN BABIN (personal funds)

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 159

City

State

ZIP Code

WOODVILLE

TX

75979

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

25000.00

0.00

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
12 31 / 2013M M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
None

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 47 OF 56

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4517

**DR BRIAN BABIN FOR CONGRESS****LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2014

**BRIAN BABIN (personal funds)**☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 159

City

State

ZIP Code

WOODVILLE

TX

75979

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

25000.00

0.00

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
02 11 / 2014

M M / D D / Y Y Y Y

D D / Y Y Y Y

None

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

**TOTALS** This Period (last page in this line only)..... ►

75000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 48 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BRIAN BABIN (personal funds)**

Nature of Debt (Purpose):

Campaign Signs

Mailing Address PO BOX 159

City State

Zip Code

WOODVILLE

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4658

Amount Incurred This Period

2780.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

2780.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BRIAN BABIN (personal funds)**

Nature of Debt (Purpose):

Advertisement - Vindicator

Mailing Address PO BOX 159

City State

Zip Code

WOODVILLE

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4655

Amount Incurred This Period

490.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

490.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BRIAN BABIN (personal funds)**

Nature of Debt (Purpose):

Advertisement - Newton County News

Mailing Address PO BOX 159

City

State

Zip Code

WOODVILLE

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4656

Amount Incurred This Period

1150.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1150.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

4420.73

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 49 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BRIAN BABIN (personal funds)**

Nature of Debt (Purpose):

Advertisement - Booster

Mailing Address PO BOX 159

City State

Zip Code

WOODVILLE

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4657

Amount Incurred This Period

2974.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

2974.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Brian Leif Babin**

Nature of Debt (Purpose):

Airfare

Mailing Address 260 W 52nd St  
21E

City State

Zip Code

New York

NY

10019

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4653

Amount Incurred This Period

896.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sue Cleveland**

Nature of Debt (Purpose):

Reimbursement-Adv/Office Supplies

Mailing Address P.O. Box 159

City

State

Zip Code

Woodville

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4654

Amount Incurred This Period

589.89

Payment This Period

0.00

Outstanding Balance at Close of This Period

589.89

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

4461.19

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 50 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Harris Media, LLC**

Nature of Debt (Purpose):

Second Half of Website and Advertsing Budget

Mailing Address 611 S. Congress Avenue  
Suite 400

City State

Zip Code

Austin

TX

78704

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4631

Amount Incurred This Period

20575.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20575.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kathy Hensarling**

Nature of Debt (Purpose):

County Maps/Office Supplies

Mailing Address P.O. Box 943

City State

Zip Code

Woodville

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4651

Amount Incurred This Period

172.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

172.54

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Internal Revenue Service**

Nature of Debt (Purpose):

Payroll Taxes

Mailing Address Ogden, UT 84201

City

State

Zip Code

Ogden

UT

84201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4662

Amount Incurred This Period

323.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

323.65

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

21071.19

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 51 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Cody Allen Jarrott**

Nature of Debt (Purpose):

Quickbooks accounting program

Mailing Address 1051 N Nellius

City State

Zip Code

Woodville

TX

75979

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4650

Amount Incurred This Period

227.29

Payment This Period

0.00

Outstanding Balance at Close of This Period

227.29

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Autumn Jodzio**

Nature of Debt (Purpose):

Contract Campaign Manager

Mailing Address 204 Fieldcrest

City State

Zip Code

Ann Arbor

MI

48103

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4661

Amount Incurred This Period

4900.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4900.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Jason Posey**

Nature of Debt (Purpose):

Yard Signs

Mailing Address 2925 Gulf Freeway S  
Suite B212

City

State

Zip Code

League City

TX

77573

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4632

Amount Incurred This Period

1125.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1125.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

6252.29

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 52 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Ryan Data & Research**

Nature of Debt (Purpose):

January/February Voter Data

Mailing Address P.O. Box 202675

City State

Zip Code

Austin

TX

78720

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4648

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Dam Good Times**

Nature of Debt (Purpose):

Advertisement

Mailing Address P.O. Box 2911

City State

Zip Code

League City

TX

77574

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4646

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Contribution Cards

Mailing Address 211 South Magnolia

City

State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4634

Amount Incurred This Period

54.12

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.12

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

3054.12

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 53 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Printing Costs

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4659

Amount Incurred This Period

50.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Envelopes

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4636

Amount Incurred This Period

253.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

253.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Letterhead

Mailing Address 211 South Magnolia

City

State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4637

Amount Incurred This Period

145.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.92

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

449.22

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 54 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Campaign Materials

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4638

Amount Incurred This Period

429.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Signs/Printing

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4639

Amount Incurred This Period

408.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

408.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Photocopies

Mailing Address 211 South Magnolia

City

State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4640

Amount Incurred This Period

32.48

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.48

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

870.42

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 55 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Campaign Buttons/Cards

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4641

Amount Incurred This Period

211.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Business Cards

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4642

Amount Incurred This Period

93.10

Payment This Period

0.00

Outstanding Balance at Close of This Period

93.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Pledge Cards

Mailing Address 211 South Magnolia

City

State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4643

Amount Incurred This Period

256.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

256.88

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

561.06

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 56 OF 56

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DR BRIAN BABIN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Document Scans

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4644

Amount Incurred This Period

3.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Posters/Push Cards

Mailing Address 211 South Magnolia

City State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4645

Amount Incurred This Period

45.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Walling Signs and Graphics**

Nature of Debt (Purpose):

Printing Costs

Mailing Address 211 South Magnolia

City

State

Zip Code

Woodville

TX

75969

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4660

Amount Incurred This Period

21.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

21.65

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

70.35

2) **TOTALS** This Period (last page this line number only) ..... ▶

41210.57

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

75000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

116210.57